

Nurses speak out on mental health crisis: “We are witness to those who suffer without the support needed to survive ourselves”

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Are you a nurse? We want to hear from you: Tell us about the conditions at your hospital and what you think about this tragedy.

The tragic death by suicide of a nurse at Kaiser Permanente’s Santa Clara Medical Center in Northern California has provoked an outpouring of sympathy, anguish and justified anger at the health care system among nurses and other health care workers throughout the country.

The death has struck a chord with nurses who have suffered from overwork for decades, enormously intensified throughout the two-and-a-half years of the pandemic. Many nurses and health workers have sent in statements of support to the *World Socialist Web Site*, while sharing their own experiences.

Connie, a former nurse in California, wrote, “I’ve left nursing for good. As a hospital supervisor for over 30 years in five different organizations, the deterioration in working conditions for hospital staff was too much to bear anymore.

“The clearest example I can give is the multiple times I went to unit managers literally begging them to let us staff their unit so we would have admit capability. Over and over, the managers would say ‘no,’ they could not staff for admissions that may or may not arrive. They would cite the organization mantra of staffing for ‘heads in beds.’ Meaning you can only staff for patients you already have and hope for discharges.

“The mantra itself is a perversion of the old mantra hospitals used to staff by: ‘bed ahead,’ meaning you staff to admit patients given that’s the business we are in.

“Why the change? Profits. Why are nurse managers quoting the administrators? Because the system of productivity is set up to reward managers who keep their numbers down with big bonuses. And managers who do not adopt the mantra and the system of extreme tight staffing don’t keep their jobs.

“So, while the CEOs are taking in a million a year—at least—and the managers are accepting bonuses to keep their

staffing levels minimal, nurses and therefore patients are suffering.

“Too many times I have had to give patients from the OR [Operating Room] or ED [Emergency Department] to charge nurses who are trying to keep their units safe and patients cared for. Too many times I have had to push nurses beyond their capacity to secure a bed for a patient who needs it. Too many times patient care unit staff go without a break or have charge nurses in care.

“Though my first concern is the patient, without a nurse there is no care. Without a critically thinking nurse who has the time and emotional capacity to give good care, the quality of that care diminishes.

“This last year I have seen too many horrific situations with patients backed up by the dozens in ED or OR waiting for beds, only to be met by stressed out nurses who often get no breaks and are called relentlessly to work overtime or to come in on their days off.

“Too many times the conditions and complaints about the conditions fall on deaf ears with management and administration because they have a vested interest in not staffing adequately—and that is money.

“Incentivizing productivity with bonuses for managers who keep their budgets to a minimum, while nurses are overworked and stressed out is the glaring wrongness of hospitals today.

“Lean methodology was supposed to mean improving care by reducing waste, not refusing to staff for admissions or providing breaks. The focus on profit and bonuses over safe staffing and the well-being of your staff is the real perversion in hospitals.

“I can no longer reconcile trying to support patient care and patient admissions by pushing nurses to work beyond their emotional and physical capacity. So I’ve left nursing. For good.”

Richard, a nurse in New York, wrote: “Nurses are seen as interchangeable pegs to fit any hole in the system.

Management doesn't see nurses as people, just pegs. It is sinful the abuses nurses suffer on a daily basis.

"I had a colleague who was attacked by a patient's visitor at the Northport VAMC. She has permanent damage to her arm. Do you know what the reaction of management was? ... They held a meeting with the patient's visitor to make sure they were satisfied with the care. The nurse tried to press charges; the VA Medical Center administration stood firmly in her way. She never got any justice."

Heidi, a travel nurse in Southern California, wrote, "I am a nurse of 20 years. ER, ICU, and hospice. I have seen a tremendous amount of suffering, and I have been in ERs on the west side of Chicago where a nurse was shot in the parking lot as she left work. However, nothing could prepare me for what I am experiencing now as a travel nurse working in California in a county mental health hospital.

"I chose to leave ER nursing at age 56 and pursue an MSN [Master's of Science in Nursing] to be a psychiatric nurse practitioner. I left ER at the beginning of the pandemic after having to re-wear my N95 day after day; after being called a 'fucking liberal' because I was tasked to keep all visitors out of the ER; after I had to sleep in separate rooms from my husband for a year; after watching a woman die and her elderly husband not be able to be able to say goodbye. That was *before* things got bad.

"I started to work as a travel nurse as a psychiatric nurse after returning to school. Fast forward 2.5 years. I arrived at a psychiatric hospital in Southern California. I'm speechless. The days are 14 hours long. The patients are the most vulnerable. People who are homeless, sometimes nameless, suffering from schizophrenia, meth addiction, bipolar disorder, and many who are hopeless, and suicidal or homicidal.

"Then enter the nursing staff to units that are understaffed, unsafe, and where staff are threatened and sometimes kicked and hit and broken and sent to the hospital themselves with injuries. There was a day recently when a violent patient entered the triage tent and trapped the staff in there where there is no escape, no cell phone service and no security. Or there were the multiple days in a row where a homicidal patient kept attacking staff day after day.

"In the emergency room in this hospital, patients cannot be turned away. Hence the days where a unit that holds 25 has 60 patients, and they have *zero* personal space. They may or may not have a plastic recliner to live in for days on end, or maybe they are stuck sleeping on the floor in the same clothes they have come in with off the streets. These patients often have nothing and are often discharged back to the streets. They are back to the same dire circumstances from whence they came.

"We are the witnesses.

"To add more to this story are the children who are literally dropped off at the front door of the hospital because a foster parent or a parent has decided they don't 'want' this child anymore. These children, too, live in recliners while in the emergency room. Clean clothes? They often have only the outfit they are wearing. Compassion? It is transient from a staff member who may not be hiding behind a wall of indifference in order to survive in this 'hospital.'

"Nurses are on the frontlines everywhere, and they have been forever. The fact of the matter is that we are a commodity. We always have been. We have become 'recognized' as we stepped in to watch people die in waves and to be asked to risk our own lives. Nurses are often abused and asked to endure the worst of the worst. We are witness to those who suffer without support needed to survive ourselves.

"Do you know what we get for nurses' week? A bag, a cup, an umbrella maybe. Mental health services? No. Higher pay? No. Vacation time independent of hospital starting needs? No. Sick time? Six days in a year. Safety from weapons being brought into a hospital? No.

"Watching corporate profits rise? Yes. Watching administration staff walk by as we take a patient covered in their own feces to the shower? Yes. Back injuries? Yes. Getting kicked in the head by a violent patient? Yes. Falling asleep as you drive home after a 13-hour night shift? Yes. Crying in your car? Yes. Worrying that you literally might not make it out alive? Yes. Worried that you made a medication error because you are understaffed and work in unsafe conditions? Always...

"I have said, and I will continue to say that nurses are the literal backbone of the health care system. We deserve better, and more importantly, the patients (that means you, my friends) deserve better! If nurses give up, or worse yet, show up without their souls intact, the blame can be placed squarely on the incessant need for profits over our own humanity.

"Sincerely, A nurse who hasn't given up (yet...)"



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